

*The Midnight Meal and Other Essays About Doctors, Patients, and Medicine*

# *The Midnight Meal*

*and Other Essays About Doctors, Patients, and Medicine*

New and Expanded Edition

*JEROME LOWENSTEIN*

Foreword by Howard Markel  
and Alexandra Minna Stern

The University of Michigan Press  
Ann Arbor

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Published in the United States of America by  
The University of Michigan Press  
First published by Yale University 1997  
Manufactured in the United States of America  
♻️ Printed on acid-free paper

2008 2007 2006 2005 4 3 2 1

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Library of Congress Cataloging-in-Publication Data applied for

ISBN 0-472-03084-1

*A CIP catalog record for this book is available from the British Library.*

“The Weight of Shared Lives: Truth Telling and Family Caregiving” is reprinted, with permission, from *The Cultures of Caregiving*, Carol Levine and Thomas H. Murray, editors (Baltimore and London: The Johns Hopkins University Press, 2004), 47–53. My earlier discussion of this case was published as “The Whole Truth? . . .” in Jerome Lowenstein, *The Midnight Meal and Other Essays About Doctors, Patients, and Medicine* (New Haven: Yale University Press, 1997), 76–80.

“Where Have All the Giants Gone? Reconciling Medical Education and the Traditions of Patient Care with Limitations on Resident Work Hours” originally appeared in *Perspectives in Biology and Medicine* 46 (Baltimore: Johns Hopkins University Press, 2003), 273–82.

In memory of my parents, Fay and Sam

and  
for Lissa, Jon, Ben, Beth, Hannah, Lucy,  
Sylvie, Ellie, and Annie

and my wife, Leahla

Not every patient can be saved, but his illness may be eased by the way the doctor responds to him—and in responding to him the doctor may save himself. But first he must become a student again; he must see that his silence and neutrality are unnatural. It may be necessary to give up some of his authority in exchange for his humanity, but as the old family doctors knew, this is not a bad bargain. In learning to talk to his patients, the doctor may talk himself back into loving his work. He has little to lose and everything to gain by letting the sick man into his heart. If he does, they can share, as few others can, the wonder, terror and exaltation of being on the edge of being.

Anatole Broyard, *Intoxicated by My Illness*

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## *Foreword*

By Howard Markel, M.D., Ph.D.  
and Alexandra Minna Stern, Ph.D.

No one can deny that medicine, health care, and disease are issues of utmost importance to Americans in the twenty-first century. With this principle in mind, the University of Michigan Center for the History of Medicine has entered into a partnership with the University of Michigan Press to publish a new series of books exploring controversies and concerns in contemporary medicine and society. We chose the series title “Conversations in Medicine and Society” decidedly because, as Professor Harold Shapiro, the president emeritus of both Princeton University and the University of Michigan, has often noted, “the term ‘conversation’ implies that everyone comes to the table with an open mind.” Our aim in selecting, editing, and publishing the books in this series, then, is not just to present facts or prescribe opinions but to explore difficult problems, to generate informed dialogue, and ultimately to shape health policy.

The books already published in the series as well as those currently in press represent a dynamic combination of historical, ethical, sociological, literary, and clinical analyses that will appeal to a broad audience of health



xii care providers, policy-makers, biomedical scientists, general scholars, and the lay public. These books share a sophistication, accessibility, and balanced perspective in addressing and discussing issues that touch everyone who interacts with the universe of medicine and health. Underpinning this approach is a crucial foundation important to the Center for the History of Medicine and the Press at the University of Michigan: the role of a public university is not only to educate students within its walls or facilitate debate among academicians. It must also enlighten the public at large and provide guideposts for navigating the institutions and ideas that comprise our world and influence our health and well-being.

Consequently, our decision to include Dr. Jerome Lowenstein's elegant and lyrical book, *The Midnight Meal*, was an easy decision to make. Dr. Lowenstein, professor of internal medicine at New York University and attending physician at Bellevue Hospital in New York City, is an accomplished and caring clinician, teacher, physician, and author. He has taught medical humanities to medical students and residents for more than three decades. One result of this brilliant career is the collection of essays you are about to read—a suite of lovely and insightful pieces on doctoring that, most assuredly, have been road tested on several generations of young doctors-to-be.

Insisting on the critical importance of the constant struggle to understand and reevaluate what it means to be human, the experience of illness, and the role of the physician in alleviating suffering as well as facilitating cures, Dr. Lowenstein represents the doctor we would all like to meet, consult, and, for those who are doctors themselves, learn from. But whether you are a doctor or a patient, or both, we all have much to gain from his experiences. Thankfully, with the reissue of this wonderful book, his wisdom is now accessible to those of us who have not had the privilege of walking the wards of Bellevue with him or seeing him in his clinic.

At first glance, the title *The Midnight Meal* might seem a bit curious to anyone who did not train in medicine before the 1980s. Long ago, at most hospitals, it was customary for the cafeteria to put out a nightly spread of bread, cold cuts, cheese, soda, and, depending on the fiscal status of the hospital, perhaps an even more elaborate meal at midnight for

all the interns and residents who were “in house and on call” and would be attending to patients until the following morning. But this midnight meal was much more than a convenience in fast food. Instead, young physicians, many of whom might not communicate with each other during the day because they worked on different services—from the children’s ward, the adult ward, maternity, emergency, and operating rooms to the radiology clinics—were forced together at the same time in the same room in the quest of sustenance not only for the body but also for the mind and soul.

Hence, midnight meals represented the opportunity for doctors to have “conversations,” if you will, about patient care, medical science, the travails of being an overworked and underpaid young doctor, and, as usually happens when active minds congregate, just about any topic under the sun. Sadly, such conversations are now a rare occurrence for medical residents and interns who are pressured and tested by high patient turnover and financial constraints and often splintered by super-specialization in graduate medical training. Rather than prompting nostalgia for the golden days, *The Midnight Meal* encourages us to reflect on how tomorrow’s doctors, and indeed the entire medical profession and health care in America, benefit from the cultivation of a sense of community. It is for today’s physicians to decide how to keep this flame lit in the twenty-first century.

Whether you are a health care professional, someone under the care of one, or a person interested in the many connections of medicine, society, and humanity, you are in for a rare literary treat. We are delighted to have played a small role in ensuring that Dr. Lowenstein’s message can be delivered to you in this newly revised version of his 1997 classic text, *The Midnight Meal*. Some revisions, including two new essays, have been added to accommodate a new century of American medicine. But the most important ingredient of *The Midnight Meal* has remained unchanged: the warm, gentle, and caring wisdom of a physician who is as gifted in his ability to manipulate a pen as his facility with a stethoscope.

## *Preface*

In these essays I speak to different listeners—to medical students, to their teachers, to physicians whose lives and energies are committed to the care of patients, and to patients themselves. The unifying theme is the conviction that in sharing what Anatole Broyard termed “the wonder, terror and exaltation of being on the edge of being” physicians will be nourished and sustained. It is my belief that this will inevitably lead to medical care that is more “humanistic” and compassionate. The origins of many of the ideas, insights, and thoughts that appear in these essays can be traced to my involvement with the program in Humanistic Medicine that has been an integral part of the education of medical students and house staff on the medical services at New York University Medical Center for more than fifteen years. Weekly small group seminars on the wards, in the Medical Intensive Care Unit, and in the AIDS Unit have created a sanctioned portion of the curriculum which allows medical students and young physicians to explore their responses to the process of becoming physicians. The program in Humanistic Medicine has given me the opportunity to work closely with an extraordinary group of xv

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xvi colleagues who serve as seminar leaders and to spend countless hours in small group discussions with medical students and young physicians-in-training.

Medical students and young physicians are more willing and able to examine and identify the feelings that underlie their daily interactions with patients than are many of my colleagues. We, physicians and medical educators, simply do not set aside the time to sit for an hour each week to explore our feelings and responses to our daily experiences. Most of us regard it as a luxury to “put a mark” on some comment or incident and examine it in greater depth with our colleagues. I strongly disagree. I have come to regard the opportunity to examine some of the many powerful experiences in my work with my colleagues as a necessity rather than a luxury. Howard Gardner, in *Creating Minds*, points out the importance of interactions with close colleagues in the process of creativity. These interactions in our seminars in Humanistic Medicine have led me to examine the process of becoming and remaining a caring physician and have been the stimulus to write this book.

## *Acknowledgments*

It was with considerable trepidation that I presented my earliest plans to “teach humanistic medicine” to students and house staff to Dr. Saul J. Farber, chairman of the Department of Medicine and dean of the New York University School of Medicine. He has been a role model and teacher throughout my career. His lifelong commitment and selfless dedication to medical education have made him unique among the leaders in American medicine. I have heard him repeat lessons that he learned from his family and his teachers. Some of his teachings are so woven into my character that I can no longer recognize their origins. The qualities of humanism, which our program is intended to foster and nourish, are an integral part of the basic fabric of his life. He listened closely, questioned, and challenged as I outlined my still-embryonic plan, and in the end gave his full support to developing the Program in Humanistic Medicine.

A diverse and talented faculty has been drawn from the Wurzweiler School of Social Work of Yeshiva University, Hunter College, the Department of Psychiatry and the Primary Care Residency program at New York University Medical Center. Aaron Beckerman, ready to examine

### *Acknowledgments*

xviii and challenge any concept, was a “founding father” together with Charlie Rohrs, a very gifted, eclectic psychiatrist. Elsbeth Couch, a genius at hearing others’ voices, along with Fred Wertzer and Ken Kahaner, who make it easy for others to find their voices, taught me to listen. Mack Lipkin, Jr., with his interest in teaching the skills of communication, brought to our program faculty members from the Primary Care program. Sarah Williams, Francesca Gany, Adina Kalet, Carol Mahon, and William Salazar added an important dimension to our program. Joshua Sherman, a lawyer, social worker, chaplaincy student, and author made his own unique contributions to our program when he was not at Oxford University.

The support of Dean David Scotch and Leslie Berlowitz and the Humanities Council of New York University were invaluable in initiating the program. After several years, I had the opportunity to meet with Bernard Schwartz, a member of the Board of Trustees of New York University School of Medicine, to describe our program. He felt strongly that what we were doing was very important and undertook to support the program as it expanded. He asked only that we come back to him and ask for more when we needed help. I will never forget our meeting which ended with a story about a “pushkie” (tzedakah box). During these years we have also received generous financial support from the Selma Turner Slater Fund, the Rose and Sherle Wagner Foundation, the Lucius Littauer Foundation, and the Conanima Foundation.

Laura Witt helped us in many ways in the beginning when we operated on a shoestring. Celia Harkin and Briedge McCarney have given much time to administrative and secretarial tasks. I am particularly fortunate that my secretary, Mildred Salwen, understood how I take care of patients and did everything to make it possible.

I am indebted to Kirk Jensen for encouraging me to write this book and for his thoughtful suggestions as it developed. Discussions with Margaret Mahoney at the Commonwealth Foundation and Sharon King at the Rockefeller Foundation finally convinced me to undertake this series of essays. I am deeply grateful to Richard Levin for his remarkably perceptive, imaginative, and valuable editorial suggestions, and to Jim

*Acknowledgments*

Dwyer for “entering into a dialogue” with this manuscript and for the finely tuned suggestions that resulted. Several found their way into this text. Special thanks go to my good friends Will Grossman, for his advice as a cardiologist and critical reader, and Doris Battistella, for her gentle editorial suggestions. xix

Dr. Lewis Thomas was the chairman of the Department of Medicine when I began my training at Bellevue Hospital. He welcomed me to join him in the exciting and rewarding life of academic medicine. Many years later, he read my earliest essay and encouraged me to write this book. His influence on my career has been very great; I owe him much.